

THE COMMONWEALTH OF MASSACHUSETTS TOWN OF AMHERST

APPLICATION FOR A LICENSE TO BUY, SELL, EXCHANGE OR ASSEMBLE SECONDHAND MOTOR VEHICLES OR PARTS THEREOF

I, the undersigned, duly authorized by the concern herein mentioned, hereby apply for a	
1. What is the name of the concern?	
Business address of the concern?	
2. Is the above business an individual, co-partnership, an association or a corporation?	
3. If an individual, state full name and residential address.	
4. If a co-partnership, state full names and residential addresses of partners.	
5. If an association or a corporation, state full names of the principal officers. President	
President Secretary	
Treasurer	
6. Are you engaged principally in the business of buying, selling, or exchanging motor vehicles?	
If so, is your principal business the sale of new motor vehicles?	
Is your principal business the buying and selling or exchanging of second hand motor vehicles?	
Is your principal business that of a motor vehicle junk dealer?	
Is your principal business that of a "Repairman?"	
Is your principal business that of a "Repossessor?"	

7. Give a complete description of all the premises to be used for the purpose of carrying on the bus	
8. Are you a recognized agent of a motor vehicle manufacturer? Yes No	
If yes, state name of manufacturer	
9. Have you a signed contract as required by Section 58, Class I? Yes No	
10. Have you ever applied for a license to deal in secondhand motor vehicles or parts thereof? Yes	s No
If yes, in what city/town	
Did you receive a license? Yes No For what year?	
11. Has any license issued to you in Massachusetts or any other state to deal in motor vehicles or p been suspended or revoked? Yes No	parts thereof ever
Please explain	
Sign your name in full(Duly authorized to represent the concern herein in	mentioned)
Residence	
<u>IMPORTANT</u>	
EVERY QUESTION MUST BE ANSWERED WITH FULL INFORMATION, AND FALSE HEREIN MAY RESULT IN THE REJECTION OF YOUR APPLICATION OR THE SUBSTREVOCATION OF YOUR LICENSE IF ISSUED.	
NOTE: If the applicant has not held a license in the year prior to this application, he must fil application with the registrar. (See Sec. 59)	e a duplicate of th
Date Approved/Denied: License #	
Remarks:	

☆ Please return this application and the License Attestation form to the <u>Select Board's Office</u>, 4 Boltwood Avenue, Amherst, MA 01002